PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

Application or Docket Number: 09/887/993

CLAIMS AS FILED – PART I

FOR	NUMBER FILED (Column 1)		NUMBER EXTRA (Column 2)	SMALL ENTITY RATE	FEE	OR	OTHER THAN SMALL ENTITY RATE	FEE
BASIC FEE (37 CFR 1.16(a))					$____	OR		$ 710
TOTAL CLAIMS (37 CFR 1.16(c))	17	minus 20 =	0	X $____ =		OR	X $____ =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	2	minus 3 =	0	X $____ =		OR	X $____ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+ $____		OR	+ $____	
				TOTAL		OR	TOTAL	710

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED – PART II

11-24-04

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
	Total (37 CFR 1.16(c))	20	Minus	20	=	X $____ =		OR	X $____ =	
	Independent (37 CFR 1.16(b))	2	Minus	3	=	X $____ =		OR	X $____ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $____ =		OR	+ $____ =	
						TOTAL ADDL FEE		OR	TOTAL ADDL FEE	

ANE 6-20-05

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
	Total (37 CFR 1.16(c))	20	Minus	20	=	X $____ =		OR	X $____ =	
	Independent (37 CFR 1.16(b))	2	Minus	3	=	X $____ =		OR	X $____ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $____ =		OR	+ $____ =	
						TOTAL ADDL FEE		OR	TOTAL ADDL FEE	

3·16·06

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
	Total (37 CFR 1.16(c))	20	Minus	20	= —	X $____ =		OR	X $____ =	
	Independent (37 CFR 1.16(b))	2	Minus	3	= —	X $____ =		OR	X $____ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $____ =		OR	+ $____ =	
						TOTAL ADDL FEE		OR	TOTAL ADDL FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.